USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

			No. of the last				CAGE MIN (DED.	NORWELINES		
PLAINTIFF							CASE NUMBER: 3:23-cv-00322-LJC		24 CONDEMN	
David A. Stebbins DEFENDANT							TYPE OF PROCESS	~		
PLAINTIFF David A. Stebbins DEFENDANT Google LLC SERVE AT NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE OR D Google LLC- For the Care of: Corporation Service Company ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 2710 Gateway Oaks Dr, Suite 150N, Sacramento, CA 95833 SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW							***See below***	FER	0	
NAME	OF INDIVIDUA	AL COMI	PANY COF	PORATION ETC	C TO SERVE OR DE	ESCRIPT	L TION OF PROPERTY (70	SEIZE OR (CONDEMN	
SERVE Goog	le LLC- For the	Care of (Cornoration	Service Company	e. To believe on be	boeren i	WORT	AK, UC		
AT	ESS (Street or R.	FD, Aparti	ment No., C	ity, State and ZIP	Code)			OISTAICE	STRIOS	
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SEND NOTICE OF SERV	ICE COPY TO	REOUEST	ΓER AT NA	ME AND ADDRI	ESS BELOW		1	1	LIFOX	
							mber of process to be ved with this Form 28	3		
David A	Stehhins		38			-				
David A. Stebbins 123 W. Ridge Ave.,						Number of parties to be served in this case		1		
APT D Harrison, AR 72601										
							Check for service on U.S.A.			
SDECIAÎ INSTRUCTIO	NG OD OTHER	INIEODM	ATION TH	TWILL ACCIOT	IN EVDEDITING SE		(Include Puriners and	Altanuata Add		
SPECIAL INSTRUCTION All Telephone Numbers,					IN EXPEDITING SE	ERVICE	(Include Business and A	<u> Auernate Aaai</u>	resses,	
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***Summons, Com	plaint and Do	ocket No	. 6 ***							
<i>5</i> ,	.p.uv u.i.u 2	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
Signature of Attorney other Originator requesting service on behalf of:						TEI EDI	HONE NUMBER	DATE		
Mark B.Busby								1/25/2023	3	
	(L)	ryel N. G	<u></u>		DEFENDANT	510-	637-3535			
SPACE BELOV	W FOR US	E OF	U.S. MA	ARSHAL O	NLY DO N	W TO	RITE BELOW	THIS L	INE	
acknowledge receipt for							SMS Deputy or Clerk	D	ate	
mber of process indicated. gn only for USM 285 if more 3 Origin Serve					V 0.00				1-1	
in one USM 285 is submitted) No. 1 No. 97				<u> </u>				1/30/2		
hereby certify and return	that I have p	ersonally	served ,	have legal evidend	ce of service, have	e execute	ed as shown in "Remarks	s", the process	described	
on the individual, compan	y, corporation, e	tc., at the a	address shov	vn above on the or	the individual, comp	oany, coi	rporation, etc. shown at th	ne address inse	erted below.	
☐ I hereby certify and re	eturn that I am ur	able to lo	cate the indi	vidual, company,	corporation, etc. name	ed above	(See remarks below)			
Name and title of individu	al served (if not s	shown abo	ve)				☐ A person of suit	able age and d	liscretion	
							then residing in			
Address (complete only dij	fferent than show	n ahove)					of abode Date	Time		
iddress (complete only ag	gerem man snow	n ubove)					2/14/23	Time		
							-11103	50	0	
							Signature of U.S. Ma		ıty	
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RECIEVED - 2/1	1/23				5					
PRINT 5 COPIES: 1. C			1		= 3			EDITIONS M	AY BE USI	

2. USMS RECORD

3. NOTICE OF SERVICE

4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal. 5. ACKNOWLEDGMENT OF RECEIPT

Form USM-285 Rev. 12/15/80 Automated 01/00